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30407 7590 09/23/2003

BOWDITCH & DEWEY, LLP
161 WORCESTER ROAD
P.O. BOX 9320
FRAMINGHAM, MA 01701-9320



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MARY P. McDERMOTT	(Depositor's name)
Mary P. McDermott	(Signature)
December 18, 2003	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/896,427	06/29/2001	Andrew Karellas	301506.1037-014	1123

TITLE OF INVENTION: SYSTEM FOR QUANTITATIVE RADIOGRAPHIC IMAGING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300 \$1,330.00	\$300	\$1600 \$1,630.00	12/23/2003
EXAMINER	ART UNIT	CLASS-SUBCLASS			
HANIG, RICHARD E	2873	250-581000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys' or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 Bowditch & Dewey, LLP
- 2
- 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

University of Massachusetts
Medical Center

Worcester, Massachusetts

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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- ☒ Advance Order - # of Copies 15

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(Authorized Signature) [Signature] (Date) December 8, 2003

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12/30/2003 HGUENR2 00000132 09896427

01 FC:1501 1330.00 OP
02 FC:1504 300.00 OP
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